

POLICING MENTAL HEALTH

AN ANALYSIS OF NYPD'S UNEQUAL CRISIS RESPONSE

FEBRUARY 2024

New York City's 9-1-1 dispatch receives nearly hundreds of thousands of calls every year since 2019 reporting mental health crises. These calls are coded as involving an 'Emotionally Distressed Person' (EDP) and the vast majority of the calls result in police and emergency services response. Police presence, with flashing lights and sirens, as well as weapons, often escalates the situation; sometimes leading to fatal shootings of New Yorkers living with serious mental health illness. Police and emergency response personnel most often transfer individuals in crisis to a hospital for a short stay before they are released back without any follow-up services. The city's go-to response to EDP calls is not unique, Fountain House's framework, "From Harm to Health: Centering Racial Equity and Lived Experience in Mental Health Crisis Response," reports that cities are prone to execute public safety and police enforcement services during mental health crises and significantly less health, mental health and social support resources. NYPD data indicates that neighborhoods with higher percentages of people of color have higher rates of recorded EDP calls and Black New Yorkers make up 50% of victims of police force in EDP calls, even though they represent only 20% of the population in NYC.

This factsheet aims to provide relevant data points to spread awareness about the intersection of the mental health crisis and police force in New York City. It highlights key public data from multiple sources to help amplify the need to remove police presence from mental health crises.

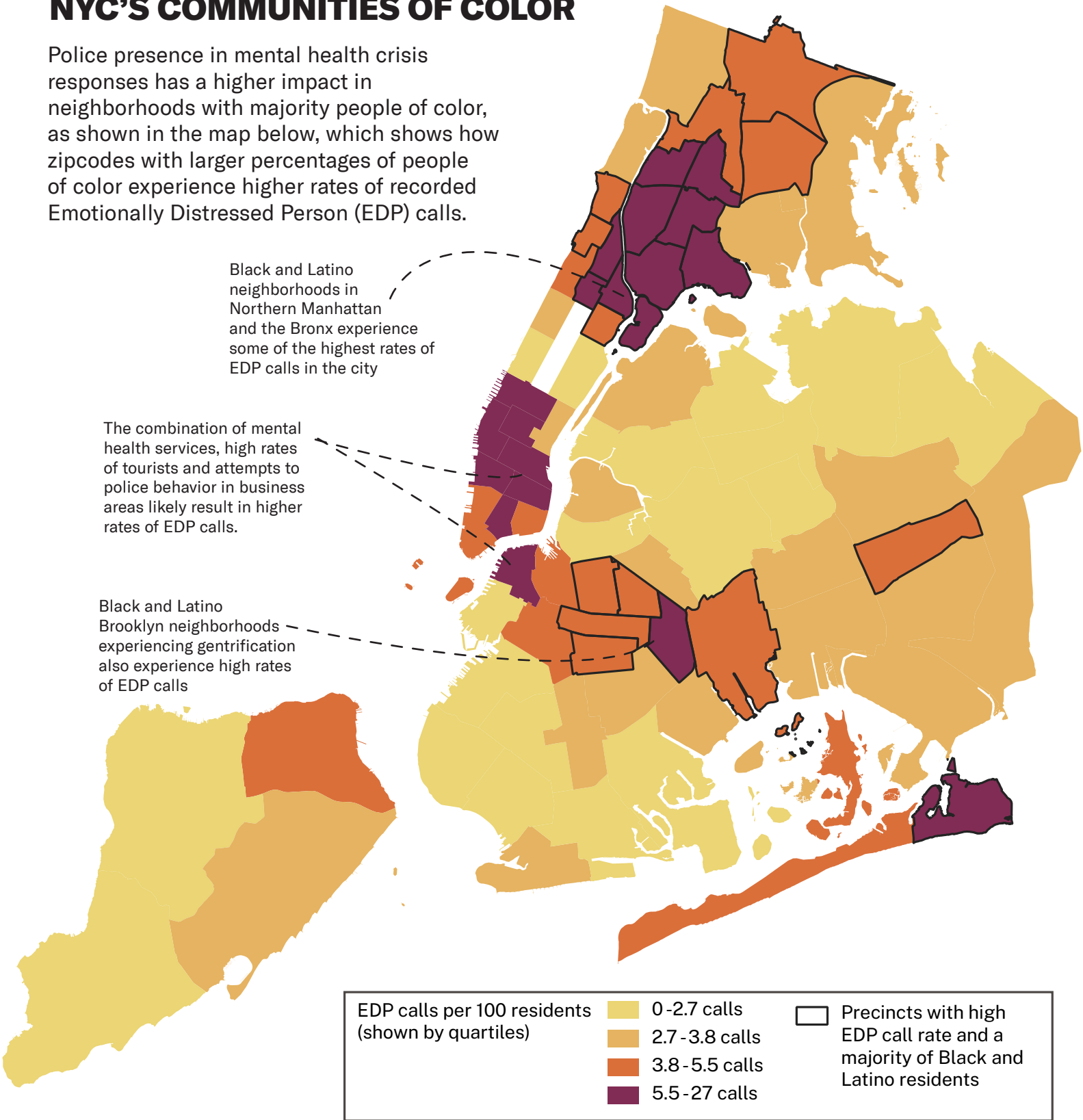
POLICE FORCE HAS AN ELEVATED NEGATIVE IMPACT ON NYC'S COMMUNITIES OF COLOR

Police presence in mental health crisis responses has a higher impact in neighborhoods with majority people of color, as shown in the map below, which shows how zipcodes with larger percentages of people of color experience higher rates of recorded Emotionally Distressed Person (EDP) calls.

Black and Latino neighborhoods in Northern Manhattan and the Bronx experience some of the highest rates of EDP calls in the city

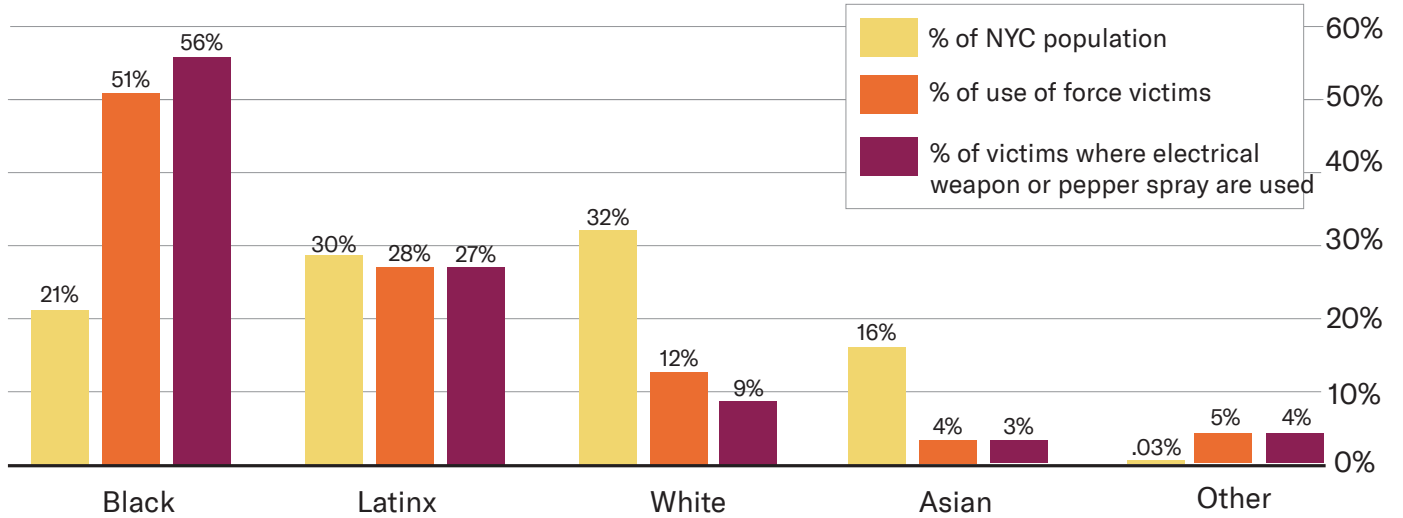
The combination of mental health services, high rates of tourists and attempts to police behavior in business areas likely result in higher rates of EDP calls.

Black and Latino Brooklyn neighborhoods experiencing gentrification also experience high rates of EDP calls



Source: NYPD (2024a)

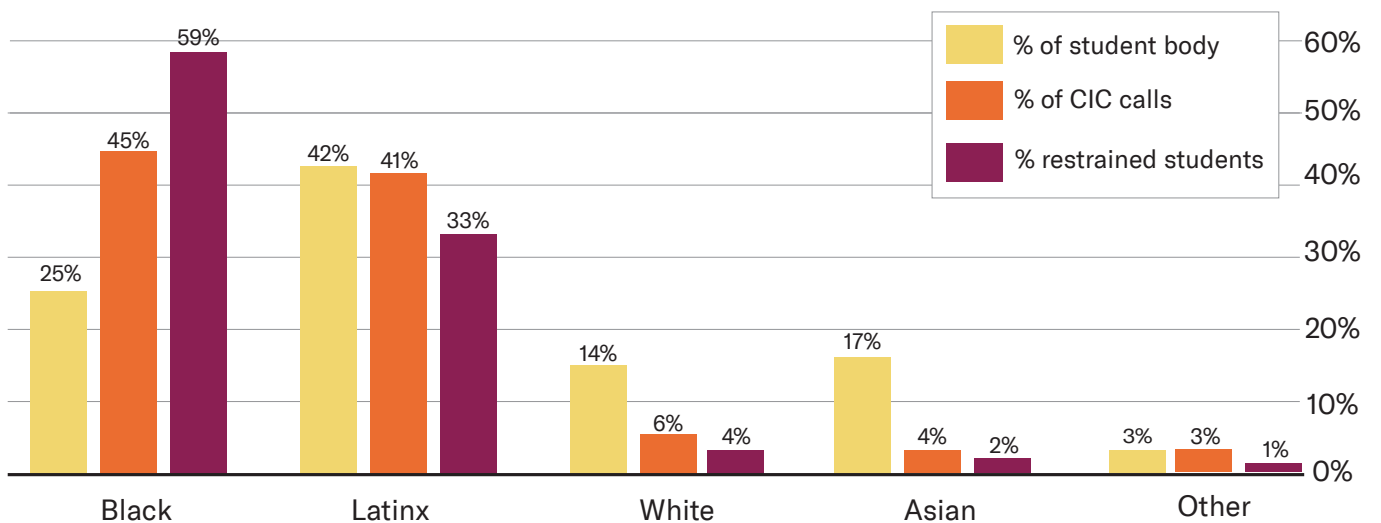
While Black New Yorkers make up 21% of the city’s population, they represent 51% of the use of force victims in “person in crisis” calls



Source: NYPD (2024b, 2024c)

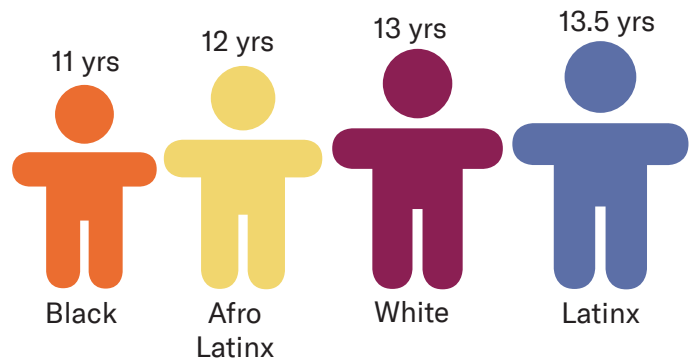
OVER-POLICING BEGINS AT SCHOOL

While Black students make up 25% of the NYC student body, they represent 45% of all Child in Crisis (CIC) calls and nearly 60% of all restrained students



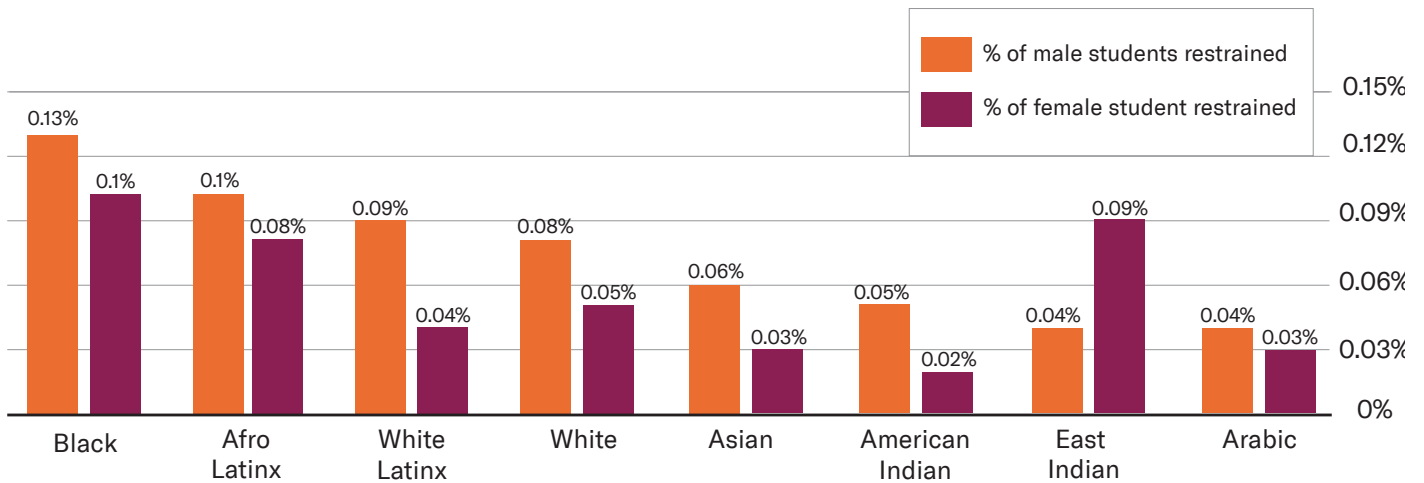
Source: NYPD (2023)

The median age of Black and Latino students who are involved in CIC calls is younger than students of other races and ethnicities:



Source: NYPD (2023)

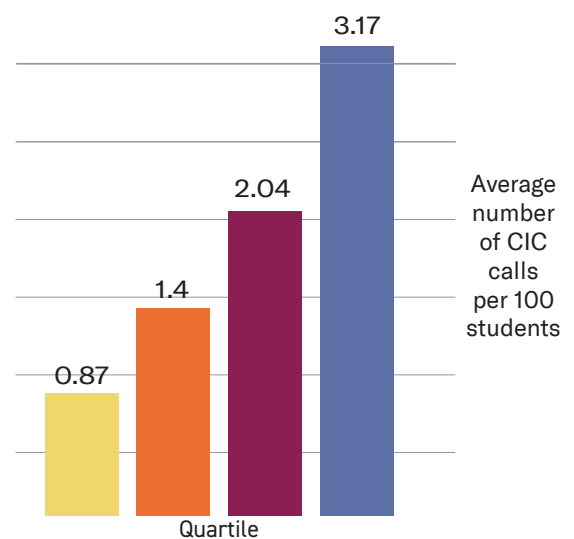
Black students are restrained during CIC calls at much higher rates than students of other races and ethnicities:



Source: NYPD (2023)

To understand if the makeup of the school population had an effect on CIC calls, we divided all NYC schools in 4 quartiles based on their percentage of Black and Latino students. The schools in the first quartile (Q1 on the graph to the right) are in the 25% of schools with the lowest percent of Black or Hispanic students, whereas the 4th quartile (Q4) includes the 25% of schools with the highest percent of Black or Hispanic students.

CIC calls are nearly three times as frequent in schools with the highest Black and Latinx student population.

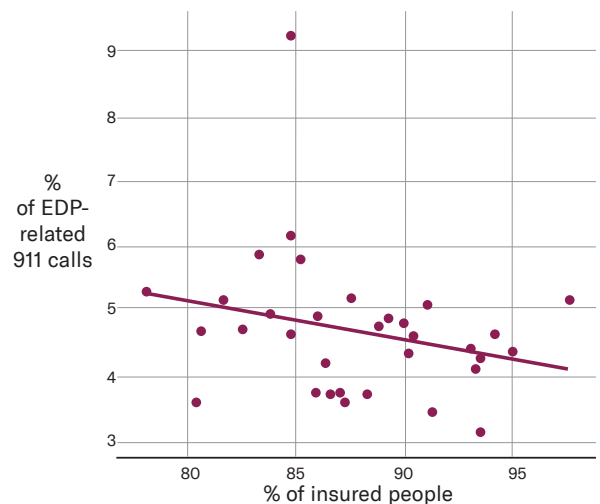
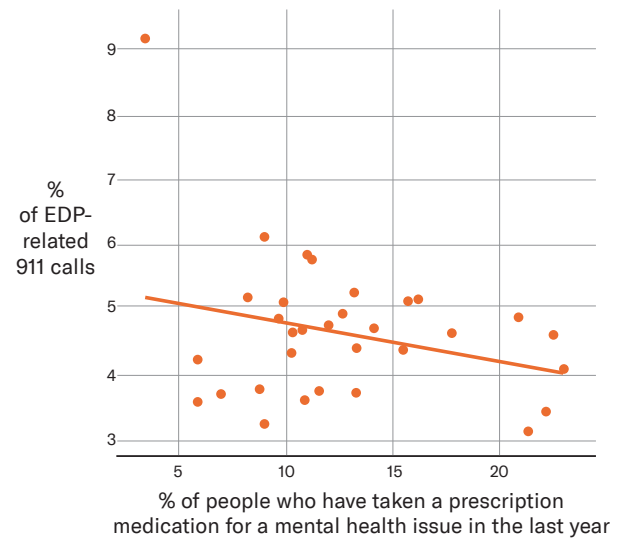
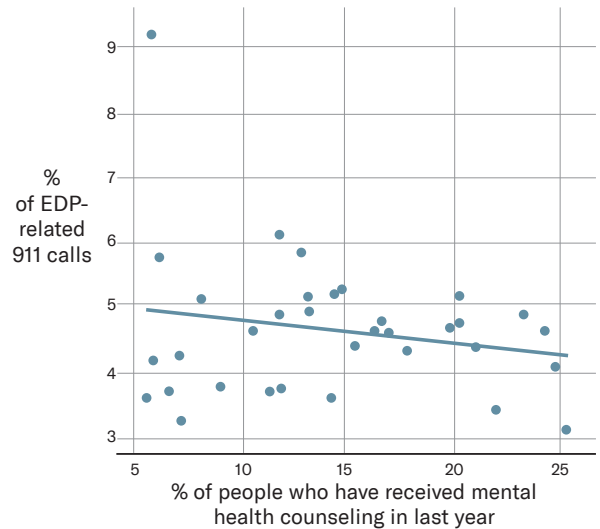


Source: NYPD (2023)

ACCESS TO MENTAL HEALTH CARE REDUCES THE LIKELIHOOD OF 911 EDP CALLS

Data from the Department of Health and Mental Hygiene (2020) and NYPD (2024) points to the opportunity preventative health care services and access can have on the health and wellness of communities of color.

Neighborhoods across the city with a higher percentage of people who received mental health counseling or that have taken a prescription medication for mental health issues in the last year have a decreased percentage of EDP calls across the city. Similarly, neighborhoods with a higher percentage of insured people indicate a lower percentage of EDP calls.



Source: DOHMH (2020) and NYPD (2024)

SOURCES

DOHMH. (2020). *New York City Community Health Survey*. <https://www.nyc.gov/site/doh/data/data-sets/community-health-survey-public-use-data.page>

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NYPD. (2024b). *NYPD Use of Force Incidents*. NYC Open Data. https://data.cityofnewyork.us/Public-Safety/NYPD-Use-of-Force-Incidents/f4tj-796d/about_data

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ACKNOWLEDGEMENTS

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Stakeholders:

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- Jennifer Wang, Senior Director of National Policy, *Fountain House*
- Eddie Gonzalez-Novoa, Dean of Multi-hyphenates, *Liberation Health Strategies*
- Jordyn Rosenthal, Advocacy Director, *Community Access*
- Taina Laing, Chief Executive Officer, *Baltic Street Solutions*

About Hester Street

Hester Street is an urban planning, design and development nonprofit that works to ensure neighborhoods are shaped by the people who live in them. We offer planning, design and community development technical assistance to community-based organizations, government and other agencies. Our goal is equitable, sustainable and resilient neighborhoods and cities.